

MEDICAL EXAMINER.

DEVOTED TO MEDICINE, SURGERY, AND THE COLLATERAL SCIENCES.

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Case of Spinal Irritation, Menstruation during Utero-gestation, frequent Abortion, &c. By A. HESTER, M. D.

On the 14th of April, 1839, I saw Mad. W. for the first time, æt. 25, of a nervo-sanguineous temperament, considerable "embonpoint," complexion shaded, muscles soft, skin remarkably delicate. She was now, according to her calculation, in the latter part of the third month of utero-gestation; had been pregnant five times previously; three abortions between the third and fourth months, and was threatened with the fourth, for which my advice was sought. I found her with skin hot, face flushed, eyes animated, pulse frequent, nausea and occasional vomiting, with irregular lancinating, and bearing down pains in the hypogastric regions.

Venesection, rest, cooling, gentle laxatives, "lac cum aqua calcis pro nauseam," were prescribed. Failing to relieve the pains by these simple measures, I prescribed the salts of morphine, enemata of laudanum, &c.; warm baths, fomentations, and other soothing applications. These had the desired effect.

April 15th.—Intolerance of light; extreme mobility of nervous system. Inherits an idiosyncrasy, which renders the use of opium and its preparations objectionable; pain under left mamma. When attempting to examine the pulse, she shrank from the slightest touch, complaining of great tenderness in the tegumentary surface of both arms, and over the thorax.

I was immediately struck with the present symptoms in this case, as being analogous, or precisely similar, to those in a female patient presented to the medical class by Dr. S. Jackson, at Blockley Hospital, with spinal irritation. I seized this symptom, and requested to examine the spine, which was found extremely painful on the slightest pressure, from the fourth cervical to the last lumbar vertebræ, inclusive.

A fact very impressive in this case was, an increase of pain under the left breast, on pressing the fingers along that portion of the spine which gave off nerves to the upper part of the chest. Scarified cups to the painful points in the course of the vertebral column followed by a subsidence of almost all pain about the chest; pulse much reduced in force and frequency, soft and regular; skin warm and quite moist; declared herself better in all respects; confessed she had been affected, during her previous pregnancies, with precisely similar symptoms,

but stated, the spine did not attract the attention of her physician.

Such a complication led me to a more minute and thorough investigation into the history of the case. Teale, in his interesting little work on Neuralgia, observes, that spinal irritation may persist, in some instances, for five or six years, according to habit, constitution, &c. This must have been a case of chronic or subacute irritation or inflammation of the cord or its membranes, or both, rendered acute or aggravated from causes constitutional, or the presence of fœtus in utero reacting upon an irritable cerebro-spinal axis. If the above suggestions derive any support from the laws of pathology, it is interesting to remark, that, as has been repeatedly stated, though phthisis, with all its direful train of evils, may be apparently suspended during gestation, yet in the subject before us, not only from my own careful observations, but likewise from the accurate and lucid statements of this intelligent lady, the spinal affection was unquestionably more painful and manifest during the period of utero-gestation. Hence it follows, that while disease in one organ may be masked or arrested in its course, in another it may be renewed, developed, and rendered more obvious through the mysterious influence of sympathy with a third organ, when called upon to assume the important office of reproduction. How far this pathologic law may apply, I am unable to determine.

Another striking feature in the case under review, and which I have embraced in the synopsis, was the non-interruption of the menstrual discharge from the time of conception up to the seventh month of gestation.

Such departures from the ordinary laws of the female economy, are acknowledged to be rare.

This was observed to have occurred in all the five pregnancies previous to the present, at least until abortion was induced in three, and up to the seventh month in the two others. I am not inclined to believe both were deceived in this matter. The patient protested that the discharges recurred regularly, that the product was in every essential similar in quality, as well as the same, or nearly so, in quantity, save, however, that she was less indisposed while it lasted in the unimpregnated state of the uterus, than during gestation. I was also informed that this lady's mother suffered no interruption of the catamenial flow during her pregnancies.

Such was the accuracy of this patient's cal-

culations, as to the time the flow would return, that the day was often specified when I might expect to be summoned to her bed side, since their irruption was accompanied with general constitutional disturbances, which threatened abortion. But cups down the spine, revulsives and anodynes, &c., in a few days usually subdued all alarming symptoms. This patient was also much troubled with obstinate pruritus vulvæ. The children born by this lady were of delicate frames, and feeble constitutions, and usually died at the end of twelve months with some complaint of the gastro-enteric surfaces. At the expiration of the nine months, this lady was delivered of a healthy and perfectly formed child.

New Orleans, March 5, 1840.

Case of poisoning from the seed of the Diospyros Virginiana. By WILLIAM ZOLLIKOFFER, M. D.

Middleburg, (Md.) March 21, 1840.

To the Editors of the Medical Examiner.

Gentlemen:—The early part of December, 1838, Mr. Kooouts sent for me to see his little son, who, on my arrival, I found complaining of great pain in the epigastric and abdominal regions. Before I saw him, in the act of vomiting, he had thrown up fifty-five seeds of the *diospyros virginiana*, which you know are very large. I administered an emetic of the sulphate of zinc, which effected the disgorge-ment of but fifteen more. Supposing, from this circumstance, in conjunction with there being an exceedingly hard knot in the region of the umbilicus, of considerable size, that they had passed into the bowels, I directed the free use of castor oil, until copious dejections were produced, by which, in three days, I effected the dislodgement of four hundred and fifty-two seeds more. As the seeds passed off, the hardened tumour gradually lessened, and at the end of the third day entirely disappeared. For several days after, a seed or two was occasionally discharged. The child's digestive organs seemed rather impaired, no doubt, from the gastro-intestinal debility produced by the distention, effected by so large a quantity of seed, of the usual size of the *virginiana*, being partially impeded in the intestinal canal for about four days from the time they had been swallowed. In order to restore his appetite, and impart tone to his stomach and bowels, I directed the use of Huxham's tincture three times a day, and the occasional use of a dose of castor oil. The child has since enjoyed good health.

I have given you the particulars of the above case, merely to show how large a quantity of foreign matter can be retained in the bowels without being productive of serious consequences, as sometimes happens from a very slight cause. You can use it as you please.

FOREIGN CORRESPONDENCE.

LETTER FROM PROFESSOR MARTINS.

No. IV.

Spirit of the French Medical Journals, and their influence during the year 1839.

PARIS, 21st February, 1840.

To the Editors of the Medical Examiner.

In politics, journals reflect the various opinions which divide a people, and so it is the case with medicine. No sooner do a certain number of physicians espouse a doctrine, than they feel prompted to make it known where it is not understood, to explain it where it has been misinterpreted, to defend it where it is attacked, and so a journal is created. Thus, since Bichât, and, after him, Broussais, agitated so many novel and interesting questions, disturbing from their sleep of lethargy, the great body of physicians who were reposing upon the pillow of tradition, the number of medical journals has been increasing from year to year. Be it said, however, to their honor, no one can be considered as undertaken for a commercial speculation. The majority cover their expenses, but few enable the proprietors to realize any profits. They continue to appear because they are the organs of a number of physicians who support them by their industry and subscriptions. The readers of the MEDICAL EXAMINER have been put in possession of all the more important productions of these journals during the past year; it has occurred to me, however, that it might not be uninteresting to present them a general review of these journals, and an estimate of their operations, drawn up by one who is personally acquainted with the editors, and can see and determine upon the spot the degree of influence which they exert upon the progress of the medical sciences.

La Revue Médicale, the oldest of the medical periodicals in France, numbers twenty years of existence. It is now under the sole editorship of M. CAYOL, who was formerly assisted by MM. Bayle, Gibert, and Martinet. This journal is the advocate of the vitalism of Hippocrates, and the representative of the school of Montpellier, personified by Barthez. It is constantly directing the attention of the physician to the observation of the physiological symptoms of disease, of the transformation they undergo, of their crises, and of the vix

medicatrix naturæ. It insists upon the study of the constitution of diseases, of the epidemics which prevail, whence are to be deduced the characters presented by diseases at any epoch or locality. It rejects the numerical system, or rather it admits its application only to questions of time, frequency and duration. It is fond of that kind of generalization in which an author draws the picture of a disease which gives it, as it were, an artistical physiognomy. La Revue is a useful journal: it is a timely counterpoise to the efforts of those who are attempting insensibly to lead us to look at nothing in a patient but the lesions of organs, and to forget the disturbance of functions; of this tendency, which it designates by the name of *anatomism*, it is a most persevering adversary. It is a warm defender of the doctrines of the spiritualists, which it is constantly opposing to the inroads of a materialism, the dangers of which it exaggerates. Many eminent men enrich la Revue with their contributions, and, what is not a little remarkable, three of them are among the physicians who have most assisted to advance the progress of pathological anatomy, viz.: Professors Cruveilhier, Cayol and Recamier. When, therefore, we see men so competent to judge, continually warning the student of medicine to beware of the exaggerations of pathological anatomy, we cannot be inattentive to their caution, nor refuse to accord to symptoms, of whatever nature, physical or physiological, their real value, deduced from observations and experience. The principal memoirs published by the Revue Médicale in 1839, are the following. An account of an operation for the cure of an hydatid tumour of the ovary, by M. Recamier. An essay on the therapeutic action of emetics, or the influence of these remedies upon the progress of diseases, by M. F. Andry. Experimental researches upon the oxide of iron as an antidote for arsenious acid, by MM. Deville, Sandras, Nonat and Guibourt. On vital energy, pathologically considered, by Dr. Bland. Clinical gatherings, by M. Payan. Researches on acute glanders, by MM. Nonat and Boulay. On the employment of the sensitive and intellectual faculties considered as a cause and means of cure of idiopathic headach (migraine,) by M. Lagasquie. On the seat, nature, and treatment of chlorosis, by M. Jolly.

Next in order and importance in the list of

journals, comes the *Archives de Médecine*, which was established in 1823. It is, singularly enough, the journal which is the most formidable opponent of the Revue Médicale. Its collaborators are all graduates of the school of Paris, educated in her hospitals, and, in theory and practice, her representatives after the most exclusive fashion. Before M. Louis applied the numerical system to the study of medicine, the Archives was the journal the articles of which made the nearest approach to that system, and heralded the way for its speedy and inevitable introduction in the science. The memoirs in the Archives were most elaborately worked out, rich in observations and autopsies, and meagre in deductions. Thus, it never became the journal of practical physicians, properly so called. The latter have no love for writers who disturb their cherished beliefs and scatter doubts over their minds. They detest scepticism, and prefer "jurare in verba magistri." Hence, they naturally prefer to throw themselves into the arms of a man whose name is authority. They follow his dicta, act as he acts, treat as he treats, and leave him the responsibility of his own acts and of theirs. That such is the conduct of a large number of men, we have no difficulty in understanding, for it is in keeping with two inherent propensities of human nature, idleness and imitateness. Now, the greater part of the long memoirs published in the Archives are often destitute of other conclusion than to point out deficiencies and errors hitherto unnoticed in the vast field of medicine, or to illustrate some obscure point in diagnosis or pathological anatomy. They are sometimes even terminated by the expression of the author's wish that his labours may be continued, himself finding them neither long nor full enough to justify any deduction whatever. For about two years past, this journal has been the organ of the numerical system which it advocates, with all its consequences. Its value and influence have been increased in the opinions of all scientific physicians who are under no apprehensions about the disturbance of their belief, or the destruction of their illusions. As the true Christian anxiously inquires of himself each day if he be in the path of truth, so they fear only error, and pursue it every where without intermission, lest it should deprive them of the most precious consolation

of the physician, the certainty of having been always useful. You will not, then, be surprised to know that the Archives de Médecine does not enjoy the popularity that it deserves, considering the number and importance of its papers. The following have appeared during the year 1839. Researches upon some points of the semeiology of affections of the heart, by M. Beau. On phlegmonous tumours of the iliac fossæ, by M. Grisolles. Thoughts on typhoid fever, by M. Valleix. Memoir on a form of encephalitis, hitherto unnoticed, by M. Durand-Fardel. On the employment of douches and cold affusions in the treatment of insanity, by M. Leuret. On a particular alteration of the bladder in certain calculous affections, by M. Bouchacourt. On the pneumonia of children, by M. Alfred Bequerel. Researches on the gravid uterus, and on utero-placental apoplexy, by M. Jacquennier. Memoir on the treatment of varices, by M. Bonnet. On ulcerations of the air passages, by M. J. B. Barth. Essay on the curability of pulmonary consumption, by M. Hogée. On a new mode of diagnosing various morbid changes of the prostate gland, by M. A. Mercier. On certain encysted tumours of the neck, by Messrs. L. Fleury, and L. Marchesvaux. On the effects of acetate of lead in the treatment of aneurism of the aorta, according to the lessons of M. Dupuytren. On the essential anatomical characteristics of yellow fever, by M. Louis. On the typhus and typhoid fever of England, by M. Valleix. Researches on the nature of tuberculous matter, by M. C. Baron. An examination of the various circumstances which appear in the course of disease, to determine the curved form of the nails, by M. Vernois. Fresh observations on the subjects of angina and tracheotomy, by M. Gendron.

The two periodicals of which we have just spoken, are devoted exclusively to medicine and surgery. But by the labours of MM. Parent-Duchatelet, Benoistan de Chateauneuf, Darcet, and Villermé, had, so to say, been created a new science, that of hygiene. These gentlemen had, with unequal sagacity and perseverance, devoted themselves to the investigation of the influence of occupations, vices, habits, locality, nourishment, &c., upon the health, statistics they employed as the only means of arriving at the truth; but they tempered it with a sound spirit of criticism and analysis, the only

mode of obtaining incontestable results. Hence the memoirs produced under such auspices are admirable, not only from the importance of the facts established, but as models of logic and reasoning. For my part, I do not hesitate to pronounce *The Annals of Hygiene and Legal Medicine*, the most philosophical journal that we possess in France. In fact, the problems which its editors have attempted to solve, are the most difficult in medicine, involving, as they do, an accurate estimate of the general causes which influence the health of a population. In making the history of the case of a single isolated individual, how great is the difficulty in determining, from the number of morbid influences to which he has been exposed, that which has caused the disease which has attacked him. In spite of the closest investigation, we are often unable to decide it. When a large number of cases are concerned, how much greater is the difficulty. Is it an easy thing, for instance, to decide what renders a particular occupation unhealthy? A superficial observer will have no trouble in answering the questions, for he has a stock of prejudices ready made for each case of difficulty? He accounts for the diseases of the persons who work in common sewers, privies, slaughter-houses of horses, and rope walks, from the deleterious miasmata which arise from these places. In the case of public women, it is the abuse of coition; and so on in other instances. And how careful should we be in our deductions, when we are aware that all these popular beliefs are erroneous, and incapable of standing sound criticism! The tendency of the *Annals of Hygiene and Legal Medicine* is to destroy these prejudices so deeply rooted for ages in the minds both of physicians and the public at large. This journal does the same service to medical jurisprudence, in subjecting to severe criticism all the doubtful cases brought before the courts, and publishing accounts of medico-legal consultations held by physicians of the highest ability in this speciality. I hesitate not then to repeat that this journal is the most useful and instructive that we possess, under whatever point of view we consider it. An enumeration of the articles published in 1839, will, I hope, bring most readers to the same opinion: On the mortality and insanity consequent on a penitentiary life, by M. Christopher Moreau. On drunk-

eness among factory operatives, by M. Villemé. On forced abortion, by Dr. Olivier of Angers. On the employment of the microscope in legal medicine, by Dr. Bayard. On foundlings, by Benoistan de Chateauneuf. Description of the apparatus to prevent soap boilers from falling into their cauldrons, by M. Darcet. On poisoning with the salts of lead, by M. Orfila. New signs of death by hanging, by M. Devergie. On the effects of swallowing pins and needles, by Dr. Olivier of Angers. On the influence of civilization in the development of insanity, by M. Leuret.

BIBLIOGRAPHICAL NOTICE.

VALEDICTORY ADDRESS to the Graduates of the Medical Department of Pennsylvania College.

By WILLIAM RUSH, M. D., Professor, &c.

ONE of the most spirited and agreeable addresses that we have for a long time had the pleasure to peruse, is the valedictory of Professor Rush, recently published by the class of the medical department of Pennsylvania college. A somewhat hackneyed topic—the prospects and difficulties of a physician's career—is treated by the professor with much originality and liveliness of thought and style. We select a few extracts:—

The turn of mind proper for a Physician.—“It may be asserted, that the vocations of men are generally induced by early and corresponding inclination for them; and though the exception is proved in the accidents which change their pursuits, and influence their destinies, biography frequently classes, as cause and effect, an early turn or bent of mind, and the subsequent strength of its grasp. Eminence, in every department of science, has traced its first risings to such early mental predilections, and it is fortunate for the young man, destined for the Medical Profession, if he brings to its elementary studies, powers of investigation, previously exercised upon *things*, without new and formidable names. Words and terms, are to him, in his new enterprise, as different strata of earth to the miner. He learns them only to know their want of use, or their frequent hindrance to his progress. But knowledge gained through the avenues of his senses—facts collected from Nature's undoubted proofs, these are the student's gold region, these, the riches which reward his toil. I need not loiter here upon the path leading to his medical degree, in attributing to him a sixth sense, if I may so speak, in the power of prompt investigation through his other five: I allot to him the best means of simplifying knowledge, and rendering its acquisition practical.

There is a resemblance in the minds of those eminent in the Medical Profession, to those distinguished in Natural Science, and the Mechanic Arts—but, the votaries of the two latter, have in their pursuit, greater facilities to their advancement, they are less obstructed by the clogs of unmeaning terminology, or the encumbrances of abstract theories. It is through experiment by the hand, the eye, by all the senses, through tests, generally the result of patient purpose; and sometimes, as if to crown with fortune such wise methods of investigation,—of very accident—that science has been developed in her simplicity, and her usefulness. These tests have been to scientific improvement, the giant strides with which she has marched. The student of medicine, aware of this, by practical observation, triumphs over his relative disadvantages, and adheres to it as the best assurance of advancing truth. His authority for it, is the reason of the rule, his examples of its achievements, whether in Medicine or Philosophy, are in the illustrious names of an Hippocrates or a Galen; a Bacon or a Newton.”

The Physician's difficulties in youth.—“I name among his early discouragements—the prevalent opinion that a Physician must be of a certain age, not in attainments, or power to use them, but in name—and number of years before he shall be entitled to confidence, employment, or reward. He may have passed his medical youth and manhood in hospitals, and among their myriads of patients;—with heroic zeal he may have walked amidst the modern pestilence of Asia, and of Europe, learning, through perilous experience, more than a life might teach; still I will carry the familiar conjecture so far as almost to believe, he will return to his native land and ask for confidence in vain,—unless an Indian clime has furrowed his cheek,—or the frosts of Russia have touched the hairs of his head. Why is not this distrust of youth exhibited in other vocations? We ask not the age of those, to whom is entrusted the care of our immortal souls; nor of those whose duty it is to protect our rights—and even to save us from an ignominious death!—their youth is a warrant for their zeal and activity.”

The Physician's reward in age.—“I have said that the usefulness of the practitioner of medicine passes not away in his old age. Time, then, proves to him an equitable paymaster. He is to his latest hour requited for confidence withheld in youth, and, if I may so speak, with interest too, for its early deprivation,—age dims not his vision of disease, nor of the means of its cure; and when his tottering limbs bear him to the door of his patient—it is a sign true as triumphant to the venerable physician, that a life of exceeding value is in jeopardy within. The ripeness of his years, is the fulness of his honor; and in that unalloyed homage, received by illustrious men in

their latter days, he enjoys what has been happily called "the best foretaste of Immortality." As surely as in his path of life, there are many "ways of pleasantness," so in its end, there is peace. Many, many, mourn his loss, and his memory is a monument reared by death, to his vanquished but intrepid enemy."

CLINICAL REPORTS.

Report of four cases of Compound Fracture, from the Pennsylvania Hospital. Dr. RANDOLPH, Attending Surgeon.

[Reported by J. F. MEIGS, M. D. Resident Surgeon.]

Case of Compound Fracture of the Thigh in a boy aged 15 years—cure at the end of five months.

W. P., a coloured boy, aged 15 years, of spare frame, usually strong and healthy, was brought into the hospital on the 6th May, 1839. A very little time before, he was violently crushed between a large heavy barrel, and a dray, to which was attached a horse at full speed.

He was at first much prostrated, but soon reacted under the use of sinapisms, and a small quantity of wine. The femur was fractured a few inches above the condyles, and the upper fragment protruded through a ragged, irregularly circular wound on the outside of the thigh, about three inches above the extremity of the condyle. Another wound involving only the integument, and about three inches long, was situated upon the middle inner surface of the thigh. Considerable hæmorrhage took place from the internal saphena vein, which it was thought proper to secure by a ligature; no other bleeding of any consequence. The ends of the bone being placed as nearly in apposition as possible, both wounds were slightly drawn together by adhesive strips, lint, and a roller applied, and the limb placed in Physick's modification of Desault's splints. Ordered Tr. Opii. gtts. xxx.

The patient was visited by Dr. Randolph, who determined, in view of the age, and apparently good constitution of the boy, to attempt to save the limb.

May 7th.—Has passed a restless night, complaining much of pain. Pulse one hundred, weak; skin hot and dry; tongue moist, with a light coat of whitish fur; no stool; not having passed any urine, the catheter was resorted to. Dressings untouched.

R.—Pulv. Doveri grs. vii., morning and evening. R.—Mist. Efferves. $\frac{3}{4}$ vi. Ant. Tart. gr. i. Ft. sol. S. c. m. q. b. h. Mucilaginous diet.

8th.—Rested well; passed his urine voluntarily; one stool. Pulse one hundred, remains weak; skin hot and dry; tongue moist, with a thicker coat of fur; strength moderate. Diet and remedies as before. The roller was removed, having become too light from the swelling of the limb; other dressings not disturbed.

A bandage of Scultetus in place of the roller, from the foot upwards.

In the evening, there being some prostration, a small quantity of wine whey was administered. Mist. Efferves. to be suspended. Pulv. Doveri continued.

9th.—Has passed a good night, but little pain. Pulse one hundred and twenty-eight, stronger than before; skin and tongue remain as before. Dressings untouched.

10th.—Doing well; general symptoms as at last note; no sloughing; suppuration not yet established; dressed with flax-seed poultices, and the same splints as before.

11th.—Rests well at night; no pain. Pulse ninety-eight, much stronger; surface of natural temperature, soft; tongue moist, and but slightly furred; one stool daily; passes urine freely. Appetite improving. Bread, tea, and gruel for diet. Wounds discharging a healthy yellow pus, in moderate quantity. No sloughing to any extent. Dressed as before.

14th.—Doing well since last note. Pulse ninety-six, a little weak; skin warm and soft; tongue moist and furred; bowels open daily; no pain in thigh; appetite good. Diet, mutton soup, bread, milk, &c. Limb dressed twice a-day. Suppuration free; leg a quarter of an inch shorter than the opposite one.

17th.—General symptoms as before; wound on the inside of the thigh granulating well. That on the outside is extending upwards, thus increasing the surface of the bone laid bare; large discharge of pus from this. Now dressed with the simple cerate, compresses of dry lint to absorb the discharge, and a Scultetus bandage with the splints.

23d.—Pulse one hundred and four, becoming weaker; skin warm; tongue nearly clean, moist and soft; bowels quite regular; appetite good; rests well at night. From the extension of the wound on the outside of the thigh, the bone is laid bare in the space of about three quarters of an inch, retaining, however, its brilliant white colour. Suppuration very abundant, but healthy in character. No union, as yet, in the bone. Dressings continued. Diet, milk, bread, mutton-chops and soup.

June 1st.—The ulcers remain in the same state as when last described. The necessity of moving the limb frequently, in order to change the dressings, has been found to give great pain and discomfort to the patient, and has contributed materially, no doubt, to keep up the irritation and consequent discharge. To remedy this inconvenience, a wooden splint was procured, of length sufficient to extend from the ankle to the groin, and curved to fit the anterior surface of the limb. This being well padded with carded cotton, was secured above and below the seat of injury, by means of rollers. The dressings being applied, a third bandage was passed lightly over them, to keep them in place, the limb slightly elevated from the bed, and a towel or oil cloth filled with

bran, placed beneath, to receive and absorb the discharge. By removing the last roller, the ulcers were readily cleansed without disturbing, in the least, the general line of the limb, thus preventing the laceration of the newly-formed granulations, which could not but take place in the old mode of dressing. The first and second rollers were changed but once a week, and when removed one at a time, did not cause much disturbance to the fracture.

From this time, there was a gradual and steady improvement, the health became good, the discharge constantly and regularly subsided; the ulcers granulated freely, and the exposed bone, which, notwithstanding its being constantly bathed in pus, had retained its pearly whiteness of appearance, was completely covered without any necrosis. The limb became firm, and when the splint was removed in the early part of July, the fracture had become almost firm, and there was only a small sinus, admitting a probe, and discharging a very little pus daily, remaining.

In August, he was attacked with erysipelas, followed by sloughing, and remained for a time in a very precarious state. Gradually, however, he recovered from this, and as the fracture remained perfectly firm, and the wounds had completely closed, he was allowed to get up, and walk about with the assistance of crutches, in the first week of October. On the 18th October, he was able to walk with one crutch and a cane.

The limb was shortened exactly two inches, but from the descent of the pelvis upon that side, he is able to walk without a high-heeled shoe. The mass of callus is very large, measuring three inches and a half in diameter, at the distance of two inches above the patella.

The general health of the patient became completely established, and he left the house on the 9th of November, 1839.

Case of Compound Fracture of the Thigh in a child of 11 years—Fracture firm, with only a small ulcer remaining at the end of six months.

J. C., aged eleven years, of healthy constitution, was brought into the hospital on the 11th of November, 1839, having fallen, a short time previously, the distance of about thirty feet, from a tree to the ground.

The femur was fractured in the middle of the diaphysis, and the upper fragment protruded through the outer edge of the rectus muscle, producing a ragged wound of about an inch in size; a piece of bone, an inch and a quarter long, composing a third of the circumference of the shaft, was found loose upon the clothes of the patient. Hæmorrhage very slight. No difficulty was found in reducing the fracture, and bringing the limb to nearly its proper length. Adhesive plaster, lint, and a bandage being applied over the wound, the limb was placed in Desault's splint, and very slight extension used.

12th.—Pulse one hundred and twenty; tongue moist and furred; skin hot and dry; no headach; passes urine freely; slept well. Diet, gruel and arrow root. Prescribed in the evening, Tr. Opii. gtts. xv. R.—Mist. Neutr. $\frac{3}{4}$ vi., Ant. Tart. gr. ss. Ft. Solut. S. c. m. q. b. h.

13th.—Has not slept well; pulse as before; skin remains hot and dry; tongue furred but moist; no headach; no pain in the limb. Upon removing the dressings, the edges of the wound were considerably inflamed and tender to the touch. Ordered four ounces of blood to be taken from around it by leeches and a warm poultice to be applied. Diet as before. Tr. Opii. gtts. v. q. h.

14th.—Pulse one hundred and twenty-four, of moderate strength; tongue moist, fur disappearing; no pain; bowels open; has passed a very good night. Thigh much swelled in its whole extent. Wound looks well; a moderate discharge of healthy pus. Dressed with flax-seed poultice twice a-day, and the same splints as before.

15th.—Has passed a very good night. Pulse one hundred and twelve, of sufficient force; skin slightly warm, moist, and soft; tongue as before; no headach; one stool; no pain in limb.

19th.—Pulse one hundred and twenty, of moderate strength; skin warm and soft; tongue moist and but little furred. Prescribed yesterday half an ounce of castor oil, which operated freely. The tension of the limb from effusion is rapidly diminishing; very little pain. Dressings continued; diet, chicken-broth, gruel, and arrow root. Suspend mixture.

24th.—Continues to improve; pulse one hundred, of natural strength; skin of proper temperature, soft; tongue nearly natural; no headach; bowels slightly costive, for which oil is given from time to time; suffers but little pain; appetite good. Suppuration is now completely established; discharge of healthy character. Dressed as before.

Dec. 11th.—Doing well; pulse regular; skin soft, of proper temperature; tongue natural; rests well at night; bowels regular; appetite good; diet, chicken, oysters, coffee, bread, tea, &c. The swelling of the limb has nearly disappeared; the wound is now about an inch in diameter, circular, the edges somewhat indurated. From its centre projects the inferior extremity of the upper fragment, so that a quarter of an inch of its length is exposed, and is of a dark colour. Discharge amounts to about half an ounce in the course of the day. The leg is shortened three quarters of an inch. Dressed as before.

Dec. 29th.—General health very good. To-day finding that the exposed portion of bone was loose, it was removed by the forceps without any difficulty. The piece is about an inch and a quarter long, forming two thirds of

the whole circumference of the shaft. The limb is shortened an inch and a half, with a very slight deviation from its proper line, from the ends of the fracture having passed each other slightly in front and behind. Union not yet firm, but becoming so. Still slight discharge of pus.

March 1st, 1840.—Since the date of last note, the fracture has gradually and firmly united; the ulcer is slowly contracting; the discharge has regularly decreased in quantity, until at present it amounts to a very few drops in the twenty-four hours. General health perfect; all his functions being regularly and properly performed. Two days ago the leg was removed from Desault's splints, and placed in a curved splint, fitting the bottom of the limb. Full diet, chicken, butter, oysters, bread, tea, &c.

March 30th.—Remains as before, except that the ulcer is of smaller size; no connection with the cavity of the fracture can be found, and from the nature of the discharge, it is not probable that there is any. Health very good. Dressed as before.

Case of severe Compound Fracture of the Right Humerus, in a boy of 15 years—complete cure in five months.

R. T., a boy aged 15 years, enjoying good health, though of rather slight frame, was brought into the hospital on the 23d October, 1839. He was playing a few hours previously with a metallic flask, containing about half a pound of powder, when, in pouring a portion on the fire, the whole exploded. The flask was broken into several pieces, one of which struck him on the right arm a little above the insertion of the deltoid muscle, severing the skin, the belly of the biceps, a portion of the outer head of the triceps, and the humerus, laying bare the upper fragment of the bone for the space of about an inch. The median nerve was exposed, but neither the bronchial artery nor vein were injured. The right hand, which held the flask at the time of the accident, was unhurt, except by a slight contusion of the thumb. The hæmorrhage was considerable, but no artery could be found, and the blood ceased to flow, except by a rather abundant oozing for some hours after. The arm was placed in a curved splint, and the edges of the wound made to approach within an inch of one another by means of adhesive strips.

24th.—Prescribed last evening, Mist. Neut. \bar{z} vi., Morph. Sulph. gr. i. Ft. sol. c. m. q. p. b. Patient rested well; had vomited several times yesterday, after taking laudanum; none after the above mixture; no pain in arm when at rest; cloths show slight oozing of blood. Pulse ninety, of good volume; skin of body warm; head warmer; no headach.

27th.—Doing well; rests well; pulse one hundred, of good strength; skin of moderate warmth; expression natural; free suppuration

of yellow pus, with pultaceous, fetid discharge; arm dressed by laying it in a curved splint of an obtuse angle at the elbow, extending from the shoulder to the ends of the fingers; the wounds slightly drawn together by adhesive strips; over this dry lint and a Scultetus bandage.

Nov. 5th.—Continues to improve; no fever; sleeps well; suffers no pain; appetite good. The ulcer is now about four inches in breadth, and two and a half in the length of the arm; granulating freely; the upper fragment laps over the lower, and is exposed to the extent of half an inch; is of a dark, brownish colour, evidently necrosing.

24th.—Doing well; pulse regular and soft; skin natural temperature; tongue clean and moist; no headach; appetite good; bowels regular; sleeps well; taking usually Tr. Opii gtt. x. every night. The ulcer is contracting, granulations firm and healthy; the discharge lessening in quantity; no union of the bone as yet. Diet, chicken, bread, soup, butter, tea, &c.

Dec. 11th.—The exposed portion of bone was found to be loose this morning, and readily removed by a pair of forceps. It is an inch in length, and forms a section of the shaft of the humerus. The limb is now one inch shorter than the opposite, and of very nearly its natural shape. The ulcer has much diminished in size, being now two inches in breadth, and one and a quarter in the length of the arm. The motion at the shoulder is free, at the elbow, slight stiffening.

Dec. 26th.—Ulcer daily contracting in size; a small portion of dead bone, to be felt by the probe, upon the upper extremity of the inferior fragment. Union perfectly firm. Dressed with Turner's cerate; a bandage applied, and the patient allowed to walk about. Continue full diet.

March 8th.—Since last note, the patient has been walking about without any interruption to his good health. Within a few days a hard scab has dropped from off the seat of the ulcer, leaving beneath, a firm healthy cicatrix. The limb has regained all its usual motions, with the exception of a very slight stiffening at the elbow, from its being so long kept in the angular position. This however is rapidly disappearing, and he will no doubt regain perfect use of the arm.

He left the house entirely well on the 11th March, 1840.

Case of Compound Fracture of the Forearm—ends of bones protruding—excision of a portion of each—complete cure in four months.

G. D. a boy aged 12 years, of healthy and robust appearance, fell, on the 21st October, 1839, five or six feet from an apple tree, upon the ground. He threw his hands forwards, and received the whole weight of the body upon them. When brought into the Hospital

a few hours after the accident, the left wrist upon examination, was found to be considerably swollen on its back, while a depression existed upon its anterior face. The radius was raised from its articulation with the carpus, about the third of an inch. By a few minutes steady extension from the hand, it was readily restored to its proper place. On the fore part of the right forearm, about three inches above the wrist, there were two lacerated wounds, separated from each other by a narrow strip of skin and muscle, half an inch wide; from these wounds protruded the upper fragments of the radius and ulna, about half an inch. All attempts to reduce them by extension, proving fruitless. Dr. Norris excised a small portion of each, by means of a pair of bone nippers, when they were replaced without any difficulty. The ulnar and radial arteries pulsated at the wrist. The arm was dressed with adhesive strips and dry lint, and then extended upon a straight splint; no hæmorrhage of any consequence. Low diet was ordered, with an opiate in the evening.

On the second day after his entrance, the arm was laid in a curved splint, and dressed twice daily, with a flaxseed poultice. On the third day there was a slight erysipelatous inflammation about the wounds, which disappeared in a few hours.

November 4th.—Whole forearm somewhat swollen; hand œdematous; considerable discharge of healthy pus from the wounds. There is a small point over the end of the ulna on the back of the arm, where the integument being very thin, it is probable that the bone will protrude; to be poulticed and retained in curved splint. General symptoms very good. No fever; appetite natural. Diet, soup, bread, rice and tea.

11th.—Ulcers on front of arm fast diminishing in size; granulations firm and healthy; discharge small in quantity. Dressed with simple cerate, and straight splint.

18th.—Two days since the integument over the ulna on the posterior face of the arm, ulcerated, and through the opening were discharged several spicula of necrosed bone. Dressing continued. General health completely established. Has full diet, and is allowed to walk about.

From this time up to the date of his discharge, the arm was dressed as usual, the fracture firmly united. Small portions of dead bone were discharged from time to time, and the ulcers did not completely close, until the latter part of January. When he left the house on the 18th of February, 1840, the limb was somewhat shortened; a large mass of callus had been thrown out, rendering the arm perfectly firm; the motions of the wrist remained free, and in all respects his arm was likely to be as serviceable to him as before the injury.

WHOLE No. 91. 27

DOMESTIC SUMMARY.

Death of Dr. Allison.—Dr. J. J. ALLISON, a young physician of Philadelphia, of great promise, died recently after a protracted illness. He was favourably known for industry and success in experimental physiological investigation, as well as for general professional attainments, and was highly esteemed for moral worth and amiability of character.

Transylvania Medical School.—The annual announcement for 1840, presents a list of sixty-two graduates, and two hundred and fifty-seven pupils—a larger class than those of many previous sessions, and one of the largest that has attended the school at Lexington. The valedictory address of Professor MITCHELL, in his usual successful style, urges modestly, but forcibly, the many claims of Transylvania upon the students of the West.

Dr. Fletcher's Improved Truss.—This truss, for some time in general use in New England, possesses modifications which are worth the notice of our southern surgeons. It is recommended by surgeons of eminence in the east, upon whose judgment reliance may be placed.

FOREIGN SUMMARY.

Clinical Lecture on Fractures, delivered at University College Hospital. By SAMUEL COOPER, Esq.—Gentlemen, as nearly one-third of the patients under my care in this hospital have consisted of persons, with broken bones, I avail myself of so favourable an opportunity to notice some of the most interesting points about this numerous group of cases, the observation of which has been amply within your reach. Although University College Hospital does not contain a large number of patients—not more than 130, on account of the present state of its funds—the great number of accidents brought to it every year, and the many operations annually performed in it, are too well known to the profession and public at large to require any observations from me.

Fracture of the Tibia and Fibula—Retarded Union.

Charles Arnott, aged 39, admitted July 7, 1839. The accident occurred from a fall, when the man was in a state of intoxication. The fracture of the tibia was exceedingly oblique; the angular displacement was considerable, and the sharp end of the tibia projected against the skin, a little above the ankle. The limb was put up on M'Intyre's apparatus, and

a compress applied so as to keep the bandage from pressing on the pointed extremity of the tibia.

No union having taken place, on the 7th of October the limb was first carefully bandaged, two lateral pieces of strong pasteboard applied, and then another roller, wetted with a solution of starch. The latter having dried, formed a stiff support for the broken limb, or what has been called by the French an *irremovable apparatus*. Under the protection of this, the patient was directed to get up, and to try to walk about the ward with crutches.

On the 22d of this month the apparatus was removed, and the state of the fracture examined. The fibula is united, and the tibia is evidently uniting also: so that, in another week or two, the cure will be sufficiently advanced to enable the man to discontinue all mechanical support of the limb.

This case, besides exemplifying the usefulness of the starch-stiffened roller, and of lateral pressure on a very oblique fracture that is slow in uniting, illustrates the occasional efficiency of letting the patient get up and walk about, so as to excite more action, as it were, in the process of union, according to the maxim long ago suggested by the celebrated John Hunter.

Thigh-bone broken a second time—Fracture of the Provisional Callus.

Gentlemen, I presume that you know the interesting fact, that when a broken bone unites, an external or temporary callus is formed in the first instance around the outside of the fracture, constituting an excellent contrivance, whereby the ends of the fracture are supported, connected together, and kept steady until nature has had time to produce the permanent callus, by which the ends of the bone are to be firmly and inseparably united directly to one another. While this forms precisely between the surfaces of the fracture, the temporary or provisional callus is like a broad hoop, as it were, placed around the broken part. After having served its transient, but very important office, it is taken away, and then the strength of the bone depends entirely on the permanent or definitive callus. At the period when a surgeon usually discontinues the splints, or other apparatus, and the fracture is considered to be united, the formation of the permanent callus is scarcely begun, and the degree of firmness in the fractured part depends entirely on the temporary callus, which is never half so strong as that of later production. Hence, if the limb be exerted too violently, or too much weight be imposed upon it, or any fall take place, the temporary callus is liable to yield or break.

The case of John Kelly, aged 24, exemplifies what I have now been explaining. He was admitted into this hospital on June 8th with an oblique fracture of the left thigh, about the middle of it, and also a fracture of both

bones of the right leg. On the 16th of August, or at the end of about nine weeks, he was discharged cured, both the thigh and leg appearing to be firmly united, and the limbs symmetrical and of the same length.

On the 19th of August he was re-admitted, in consequence of a fall against the edge of his bed, and a fracture of the thigh-bone in the same situation as before. This second fracture was put up in the straight position, and with the long splint.

Sept. 20.—On examination of the thigh, the bone was found to be uniting again.

Oct. 16.—Union firm again—limb of the same length as the other—long splint discontinued, and merely pasteboard and a roller applied.

Oct. 22.—All mechanical support removed, and the man allowed to use his crutches again.

This case, gentlemen, shows you several interesting points.

1. The liability of the provisional callus to be fractured, if exposed to external violence, or undue efforts, or too much weight upon it, previously to the completion of the definitive callus.

2. The truth of Dupuytren's calculation, that when the provisional callus breaks, about as much time is requisite for the second cure as for the first.

3. The case gives you a fine example of an abundant provisional callus, which is felt to be of great thickness, but which, if the man come under our notice again a year hence, when the definitive callus will be complete, will all have been removed, and the bone reduced to its natural size.

4. Convenience of the treatment with the patient lying on his back.

Compound Fracture; Wound healed without Inflammation, or any serious Constitutional Disturbance; Union as prompt as that of a Simple Fracture.

These circumstances are exemplified in the case of Sarah Bishop, admitted under me, Sept. 10, 1839.

The limb was placed on M'Intyre's apparatus—the bones adjusted, and lint dipped in cold water laid over the wound.

14th.—Wound had completely healed, but a trivial slough afterwards separated, which left a small sore, that was perfectly healed by 5th of October.

Fracture of the Frontal Bone communicating with the Ethmoid Cells, or the Frontal Sinus, and attended with Emphysema, and Concussion of the Brain.

Traumatic emphysema of the eyelids is not very uncommon. Dupuytren relates a case where it was presumed to have arisen from a fracture of the os planum of the ethmoid bone, or else of the lachrymal bone. He gives the particulars of another case, in which traumatic emphysema proceeded from a laceration of the

pituitary membrane; opposite the junction of the lateral nasal cartilage, which was itself separated from the bones of the nose. In a third instance, recorded by the same illustrious surgeon, the emphysema was occasioned by a fracture of the frontal sinus. I will now enter into some explanation of the case which was lately brought to this hospital, and which will be found to present several points of interest:—

Arthur Hallam, aged 36, admitted June 22, 1839, footman to His Royal Highness the Duke of Sussex; of temperate habits, and good constitution.

About half-past 11, A. M., as he was proceeding from the terminus at Euston-square, in the last carriage of the railway train an engine came up behind at full speed, and struck the carriage with immense force, whereby he was thrown forwards with great violence, and he received a severe blow above the right eye which completely stunned him. In this state he was brought to the hospital: pulse small and feeble, pupils of the eye dilated. Notwithstanding the ecchymosis and swelling, a fracture of the superciliary ridge was perceptible, accompanied by emphysema, and a crepitation of air in the cellular tissue around the orbit. There was hemorrhage from the nose and mouth.

A few minutes after his admission he became sensible, and his pulse began to rise. He now complained of severe pain in the head.

At one o'clock I saw him. As he had then rallied considerably, and the pulse was fuller and stronger, $\bar{3}$ xvj. of blood were taken from the arm; all the fore part of his head was shaved, and covered with linen wetted with cold water, and gr. v. of the chloride of mercury were prescribed, and followed by the senna mixture every four hours.

Ten o'clock, P. M. Severe headach yet persists; *double vision*; pulse being full and hard $\bar{3}$ xvj. more blood were drawn, and the evacuation afforded much relief.

June 23. Headach still severe; *pain in the epigastrium*, *dimness of vision*, and *intolerance of light*. Has had *shiverings*. Bowels have been freely opened.

Eighteen leeches applied to the epigastrium, cold lotion continued, and two table spoonsful of the saline antimonial mixture directed to be taken every four hours. The bleeding from the leeches gave considerable relief.

June 24. General improvement, emphysema lessened, pulse reduced to 85.

June 25, nine, A. M. Further amendment; intolerance of light and dimness of sight removed. Cold lotion and saline aperient mixture continued.

Ten, P. M. Feel of coldness in the course of the spine; more headach; *vision indistinct again*. Twenty leeches applied to temples, followed by fomentations.

June 26. Symptoms relieved, emphysema

more diminished, distinct vision restored, pulse soft and regular, little appetite. Cold lotion and saline aperient mixture continued.

June 29. Severe pain in the right temple having come on again, fifteen leeches were applied, and gave great relief. The bowels being too open, the sulphate of magnesia omitted in the mixture.

July 4. Allowed to get up and take a little beef tea, for the first time. *Light yet inconvenient* to the patient when he looks at a window. Cold lotion and mist. ant. tart. continued.

July 20. Discharged, cured. The patient called at the hospital a few days after this date, complaining of vertigo and headach, for which he was cupped, and restricted to a very low diet. This plan at length restored him to perfect health.

This case, gentlemen, gives you an instance of the following circumstances:—

1. Fracture of the frontal bone, extending either to the frontal sinus, or os planum, with traumatic emphysema.

2. Fracture with concussion of the brain.

3. *Dilatation of pupils*, frequently noticed in the early stage of concussion.

4. Concussion succeeded by *diplopia* and indistinct vision, of which we have lately had other examples in the hospital.

5. The long duration of headach, intolerance of light, and other symptoms after concussion of the brain, and their great propensity to return.

6. The signal efficacy, in such cases, of bleeding, leeches, cold lotions, calomel, and antimonial saline medicines, with a rigorously low diet.

7. The quick appearance of emphysema after a fracture of the foregoing kind; its limited extent, so different from what sometimes follows an injury of the lungs themselves, and the usual commencement of its subsidence in three or four days after the accident.

On the employment of a new vegetable, *Monesia*, in Medicine. By Dr. G. J. MARTIN ST. ANGE.—A vegetable substance, called *monesia*, has lately been imported from South America, in the form of hard thick cakes, weighing about five hundred grammes, (9215 grains.) These loaves, which are flattened, and have paper, of a yellow colour, adhering to them, are composed of the extract, prepared in the country, from the bark of a tree, whose botanical name is not known. M. Bernard Derosne, the druggist who introduced it, informs me that some travellers call the monesia bark *goharem*, and others, *buranhem*. But what is of more importance, is, that the naturalists who have examined it, think that the tree which furnishes it, is a *chrysophyllum*.

The extract is of a deep brown, and very friable; when broken, it looks like a well roasted cocoa-nut. It is entirely soluble in

water; and its taste, which is at first, sugary, like liquorice, soon becomes astringent, and leaves behind a well marked and lasting acid taste, which is particularly felt in the tonsils.

The bark of the monesia is smooth and grayish, like that of the plane tree, with this difference, however, that it is much thicker; that its fracture is imbricated, and that its sweet taste forms a strong contrast with the bitterness of the thin laminae which are detached from the plane.

The chemical analysis of the bark of the monesia, and of the imported extract, according to MM. Bernard Derosne and O'Henry, has demonstrated the presence of the following soluble principles:—1, Chlorophylle; 2, vegetable wax; 3, a fatty and crystallizable matter; 4, glycyrrhizine; 5, an acrid and somewhat bitter substance; 6, a little tannin; 7, an unexamined organic acid; 8, a red colouring matter, resembling that of cinchona; 9, phosphates of lime, with organic acids.

The pharmaceutical preparations which have been made with this substance are—1, an aqueous extract; 2, a syrup, containing thirty centigrammes, ($5\frac{1}{2}$ grains) in the ounce; 3, a hydro-alcoholic tincture, containing two grammes (37 grains) per ounce; 4, chocolate, containing thirty centigrammes ($5\frac{1}{2}$ grains) in each cake, weighing three decagrammes (7 drachms, 49 grains;) 5, an ointment, containing an eighth part of its weight of extract; 6, monesine being the acrid substance mentioned in the analysis.

The extract contains about eight per cent. of glycyrrhizine, and twenty per cent. of acrid matter.

The following accounts of monesia are already in existence:—1. A manuscript memoir, which is in the hands of the commissioners appointed by the Academy of Medicine. 2. A synoptical table, giving the analysis, some pharmaceutical preparations, and the medicinal preparations of monesia. 3. A very minute summary of these two papers, entitled, "Account of Monesia." 4. An article inserted in the *Bulletin Thérapeutique*.

I will now give a succinct account of the facts which have been published, before mentioning the results which I have obtained, myself.

The medical cases in the synoptic table have been drawn up by several physicians in Paris; they give the nature of the disease, the sex, the profession, the age, and the constitution of the patient; the mode of treatment, and duration of the disease, the termination; and, lastly, the remarks suggested by each method of treatment.

M. Alquié, professor of internal pathology at the Val-de-Grâce, found—

1. That of forty-two soldiers attacked with diarrhoea, of different degrees of severity; thirty-six were cured in twelve days; twenty-four by the extract of monesia, given in pills,

in the dose of from eighty centigrammes, to a gramme ($14\frac{1}{2}$ to $18\frac{1}{2}$ grains) a day; and twelve by the tincture, administered as a clyster, in the dose of eight grammes ($147\frac{1}{2}$ grains) in two hundred and fifty grammes ($4607\frac{1}{2}$ grains) of bran water.

2. That in two cases of menorrhagia, the extract and the tincture of monesia given internally, soon calmed the pain, and stopped the uterine discharge.

3. That in four women attacked with profuse leucorrhœa, the extract of monesia given internally, and the diluted tincture injected into the vagina, were beneficial.

4. That in two cases of hæmoptysis, where bleeding, ligature of the limbs, and ordinary astringents, had been employed without advantage, the extract of monesia succeeded completely; and that several chronic cases of bronchorrhœa were benefited by the syrup of monesia, which was sometimes combined with opium.

M. Baron cites—1. A very remarkable case of chronic inflammation of the vagina, of a syphilitic kind. No advantage had attended the previous use of baths, local bleedings, emollient and astringent injections, the nitrate of silver; a year later, the diluted supernitrate of mercury, sulphureous baths, leeches, and the repeated application of blisters and sinapisms, were equally useless. In spite of these remedies, the discharge from the vagina became more abundant. Injections were then used containing thirty grammes (552 grains and 9-10ths) of the extract of monesia in a hundred and fifty grammes ($2764\frac{1}{2}$ grains) of water. In eight days the discharge was much diminished, and in three weeks the patient was cured. The discharge returned in a month, but again yielded to the same injections.

2. A case of leucorrhœa. The discharge was copious, of a yellowish white colour, and accompanied with pains in the groins and lumbar regions; baths, leeches, and injections of mallow water and laudanum, had produced no benefit. Injections of monesia, in the proportion of thirty grammes (552 grains and 9-11ths) to a hundred grammes ($3317\frac{1}{2}$ grains) of water, were employed once a day, and the patient was cured in a fortnight.

3. Several cases of diarrhœa, which resisted the means generally used, were cured by the extract of monesia given internally, and clysters containing the tincture, in different proportions.

M. Buchez has employed the extract of monesia, and has remarked, that it delayed the progress of caries in the teeth, and that when combined with opium, it often soothed the pain more effectually than the opium alone. He recommends the employment of the tincture to keep the gums in a healthy state.

M. Daynac speaks of the good effects he has obtained from the preparations of monesia

(the syrup, lozenges, and paste) in several cases of the chronic catarrh of the old, in dyspeptic persons, and in the third stage of phthisis. He also cites remarkable cases of scrofulous engorgement, much benefited by the use of the tincture of monesia, in the dose of eight grammes (147½ grains) daily, continued for a greater or less time. Lastly, the extract of monesia in pills, in the dose of sixty to ninety centigrammes (11 to 16½ grains,) has been very serviceable in uterine discharges.

M. Laurand speaks of a well marked case of scurvý which he cured with monesia. The patient had had frequent epistaxis, which had several times required the nostrils to be plugged. He was made to inspire acidulated water by the nostrils, containing thirty grammes (552 grains and 9-10ths) of the tincture to a pound of water. This stopped the hæmorrhage; but when the same thing had been done with acidulated water not containing monesia, it had not succeeded. The patient also took from a gramme to a gramme and a half (18½ to 27½ grains) internally, every day. The same physician has ascertained the efficacy of monesia in a great variety of circumstances, particularly in gangrenous eschars on the sacrum.

M. Manec has employed the different preparations of monesia with success:—

1. In a man who, for six years, had had a large herpiginous ulcer in the bend of the groin, which had resisted every kind of treatment, and which rapidly improved under the use of monesia ointment.

2. In a great number of aged women, labouring under diarrhœa, and in persons affected with chronic bronchitis.

M. Monod has furnished some very interesting cases; some, of ulcers of the nose, and others of affections of the intestinal canal.—The ulcers were dressed with the powdered extract, and cured in a few days. In the other cases, the extract given in pills to the amount of sixty to a hundred and twenty centigrammes (11 to 22 grains) daily, was perfectly successful.

M. Payen, who has employed monesia in a great number of cases, has seen a patient in whom leucorrhœa was considerably increased by this medicine, administered two different times; the monesia was then tried as an injection, and the discharge, which had hitherto resisted every remedy, disappeared, and did not return. The same practitioner cites two cases of uterine hæmorrhage, where the patients were obliged to keep their bed for a fortnight at each menstrual period, and in which the monesia brought back the discharge to its healthy standard. Lastly, M. Payen has succeeded in cicatrizing an ulcer in the lower jaw, which for ten months had resisted every kind of treatment, both internal and external; and in healing ulcerated chilblains, by means of the ointment and the powdered extract of monesia.

Thus we see that monesia has been employed both externally and internally. It has been frequently administered during the chronic stage of bronchitis, usually alone, but sometimes combined with opium, and in the greatest number of cases it has seemed to act advantageously upon the disease, the expectoration and respiration being rendered more easy.

In many cases where pulmonary hæmorrhage was prolonged, having resisted various and generally efficacious remedies, the extract of monesia has stopped the spitting of blood.

In weakness of the stomach, monesia has a very favourable influence on digestion, and secondarily on nutrition. This medicine has also been very beneficial in chronic enteritis; it has chiefly succeeded against diarrhœa, from whatever cause it arose.

The efficacy of monesia taken internally has been less marked in leucorrhœa than in diarrhœa; yet it has been useful in the majority of patients who have taken it; but injections have been more advantageous.

In every case of uterine hæmorrhage where monesia has been given, it has succeeded in moderating and suppressing the discharge more readily than the other remedies which had been previously used.

Monesia has also been of great advantage in scorbutic and scrofulous affections, and has always benefited ulcers of a bad character, whether the ointment, or the pure extract powdered, or the acrid substance contained in it, has been employed.

Such is the compendium of the cases hitherto published, with the exception of four by M. Forget, which are the basis of the article that he has published in the *Bulletin Thérapeutique*, and which, as he says himself, neither tell for nor against monesia.

We may say, therefore, generally, that monesia shows its maximum of power in diseases of the digestive organs, in hæmoptysis, uterine hæmorrhage, and ulcers of the skin, or of the mucous membranes, at their origin. A remarkable point in this remedy is, that although it is gifted with energetic powers, and has acted upon the tonsils or upon ulcerations as an active stimulant, it has never irritated the stomach as tonics, properly so called, often do. In order to form a due estimate of its relative activity, we must not forget that it has always been employed after the exhibition of other remedies.

I now come to my own cases, the general results of which may be stated as follows:—

Monesia, when exhibited internally, in the dose of from 75 to 125 centigrammes (14 to 23 grains) of the extract daily, for eight or ten days, whether in the form of pill, tincture, or syrup, has an immediate effect upon the digestive passages, and quickens the action of the stomach in a very remarkable manner. If the dose of the remedy is pushed to four

grammes (74 grains) of the extract, daily, for fifteen or twenty days, the appetite increases, but the patients sometimes experience a feeling of heat in the epigastrium: * tenesmus and obstinate constipation may also come on; hence its action upon the digestive tube should be moderated by diminishing the dose according to the effect produced, and administering emollient or laxative clysters, as may be required.

Monesia ointment may be employed externally upon sores, in every case, but with more or less success, according to circumstances: thus I have seen it succeed in large and excessively painful ulcers, arising from the action of blisters, in sores produced by burns, in varicose ulcers and old wounds; in a word, whenever the sore is painful, and depends on a merely local affection. When this is not the case, and the ulcer is kept up by syphilis, scrofula, scurvy, or cancer, it is impossible to effect a permanent cure by merely applying the monesia ointment, washing the sores with the tincture, or sprinkling them with the extract or acrid principle contained in it. Yet, by employing these different preparations in a proper manner, we may hope to modify the sores, and even to cure them for a time. Generally speaking, the ointment, when applied to a sore, calms the local pain; the tincture thus used, produces a sensation of heat, which ceases immediately; the powdered extract more or less excites the sore, and the acrid principle in powder, when well prepared, has a special activity greater than caustic: hence it is a powerful remedy against fungous or atonic ulcers of a bad appearance; but as soon as these sores become painful, and especially when they are covered with a whitish pellicle, the use of the acrid principle should be discontinued; for it is usually this pellicle which, by preserving the surface of the sore from contact with the air, and perhaps by becoming partly organized, produces cicatrization.

I have said expressly, that it is impossible to obtain a lasting cure of syphilitic or cancerous sores by the mere external use of this remedy; in such cases, therefore, we must have recourse to a specific treatment capable of acting on the system. I have found, that in order to effect the cure of scrofulous ulcers, the monesia must be employed internally, for five-and-twenty or forty days, and even longer, according to the case; and this in large doses, such as four or five grammes (74 or 92 grains) of the extract daily, in the form of pill, tincture, or syrup. In this way I have succeeded in curing or benefiting several scrofulous patients. Here follow two remarkable examples:—

Case I.—A young man of 17, a printer,

* Showing that it *does* irritate the stomach, contrary to the assertion made a few lines before.—*Translator.*

born of very healthy parents, came to see me in February, 1839, to have the little finger of his left hand amputated. On looking at the diseased parts, I saw it was a scrofulous affection of only eight months' standing. The first phalanx was much swelled, the soft parts covering it, were livid, and there were three fistulous openings in the skin; two corresponding to the dorsal part of the phalanx, and the third to its palmar surface. They were surrounded with callous vegetations of a brownish colour, and communicated with one another by means of subcutaneous fistulous passages. By introducing a blunt probe into the sores, it was easy to reach the bone of the finger, and to ascertain the detachment of the skin and the caries of a portion of the phalanx. The suppuration was serous, yellowish, of a faint odour, and contained some flakes of a substance which seemed carious. Strong pressure of the diseased tissues occasioned hardly any pain. On the back of the hand and left elbow, there was also a swelling of the skin and of the subjacent parts, looking like the little finger. The swelling and livid patch extended from the elbow* to the inside of the bend of the arm; its centre was ulcerated, and covered with a thick crust, which, according to the patient's report, was renewed every two or three days.

I began by sprinkling the acrid principle of monesia on the small sores of the finger. After some days' dressing, the swelling of the soft parts began to diminish, and at the end of about twenty days, the fistulous openings entirely closed. The diseased tissues at the back of the hand then ulcerated, and the acrid principle being employed as above mentioned, in a few days a cure was effected. There remained only the sore upon the elbow, which had been purposely dressed with cerate. It continued to suppurate, and to be covered from time to time with a fresh crust.

The patient was in this state when I presented him to Dr. Bailly, who had been commissioned by the Academy to report on the effects of monesia. The affection appeared to him to be evidently scrofulous, and the result obtained, to be very satisfactory. The disease, however, soon reappeared; the fistula of the finger began to suppurate again; there was swelling and livid redness of the soft parts, with engorgement and induration of the back of the hand; the sore on the elbow became larger and deeper. The patient now entered the hospital of St. Louis, where he had internal medicines as well as fumigations, sulphurous baths, &c. In a month, he came out, with the diseased parts in a worse state than ever. I now prescribed the internal use of monesia—namely, twelve pills, each containing 20 centigrammes ($3\frac{1}{2}$ grains,) and two

* The original here has *cou*, but this must be a misprint for *coude*.—*Translator.*

spoonfuls of the tincture. The sores were dressed with common cerate. Under this treatment, the patient was cured in thirty-five days. Nevertheless he continued to take five pills a-day, till the fiftieth day.

Since July, the diseased parts have been constantly improving, and a lasting cure may be hoped for. It is right to state, that in this case the preparations of monesia did not cause tenesmus or constipation, although the patient did not employ any purgative; the only thing he complained of, was too much appetite.

Case 2. M. —, æt. 40, who had always enjoyed perfect health, came to France two years ago, and perceived, in the month of April, 1839, that he had an indolent tumour in the left inguinal region. Several physicians of the capital were consulted, and they ascertained that it was a swelling of one of the superficial lymphatic glands, situated in the bend of the groin. On the 21st of the same month, I was also consulted by the patient. The diagnosis was not difficult, but the point was to know how the tumour would turn out. My prognosis was favourable, like that of all the other physicians, excepting M. Lisfranc, who thought that the swelling of the gland, though slight, depended on a general affection. On the 2d of May the groin continued to swell, and from that time all the other glands of that part, as well as of the left iliac fossa, swelled considerably; and this was soon the case with those of the opposite side. Twenty pages would scarcely suffice to tell all that was prescribed by the physicians, and patiently submitted to by M. —. No remedy was of any use, except for a short time; and I therefore proposed monesia, in the dose of one hundred and fifty centigrammes (twenty-eight grains) of the extract a-day. The patient at this time was extremely weak, ate but little, and was feverish every day. In a week, digestion had improved; there was a sensible increase of strength, and no fever. The sores were dressed with the monesia ointment. In consequence of these results, I tried to augment the dose of the medicine, and, besides the extract, the patient took two spoonfuls of the tincture, and from four to six of syrup in an infusion of hops. As to the sores, which obviously grew better, the same dressing was continued morning and evening, and every thing promised a speedy cure, when constipation and a most painful tenesmus came on, which obliged us to suspend the treatment. In a few days the sores became larger and larger, fungous and of a bad appearance.

The dressing was then changed—extract of monesia in powder and the tincture being employed; but these remedies were almost as useless as a host of others which were successively tried. It then seemed clear to me that the internal use of monesia had alone produced the improvement, and its use was accordingly resumed, taking care to make laxatives a part of

the treatment. For this purpose the patient had two glasses of Enghien water every morning, and an emollient clyster. In a fortnight, the good effects of the monesia were again perceived; and this was more to be attributed to its internal use, as the dressing had been performed with simple cerate.

At present, the swelled glands of the groin are softening and disappearing, without any suppuration. Those of the iliac fossa are diminishing in size; the sores have cicatrized, and the disease, far from attacking the lymphatic glands of the other parts of the body, as is commonly the case, is localized, and is much lessened. The patient eats with a good appetite, sleeps well, and takes exercise three hours a day, which makes us hope for a fortunate termination of the disease.

Another result which I have obtained from the use of monesia, and which has been observed by other practitioners likewise, is its action upon the uterus in cases of *meorrhagia*. I will give two instances:—

*Case 3. —*Madame —, of a plethoric constitution, was attacked, after the catamenial period, with a flooding, which obliged her to keep her bed and seek for advice. After having employed cold drinks, ligatures on the limbs, cupping-glasses, and other revulsives, without success, I made the patient take five monesia pills, each containing twenty centigrammes (three grains and three-fifths.) The next morning she was very weak; the skin burning, the pulse scarcely perceptible, the face pale, and the eyes sunken. She had shivering fits from time to time, a sensation of weight in the loins, transient colic pains, and headach, with sleepiness; and what was more, the hæmorrhage did not diminish. I then prescribed twelve pills of extract of monesia to be taken every hour. The discharge stopped the same day and never returned.

*Case 4. —*Madame —, aged 20, who had been married six months, had frequent pains in the loins; and in a few days a flooding came on, which obliged her to keep her bed. The hæmorrhage increased, as soon as the patient got up; there was no pain in the abdomen, and no constipation; the pulse was weak and irregular, and from seventy-six to eighty in a minute. Revulsives, cold and acidulated drinks, clysters of cold water, and compresses dipped in iced water and applied to the thighs, had no effect. The ergot of rye was then employed, but as this excited vomiting, it was discontinued, and pills of the extract of monesia were ordered to be taken every hour, until an effect was produced. After fourteen pills the hæmorrhage ceased. The patient then took cold broth at intervals, and in spite of the lightness of this food, the discharge returned in the evening with violence, and again ceased after the exhibition of ten monesia pills.

On the following day, the dose of the medicine was diminished to seventy-five centi-

grammes (fourteen grains) and in six days the patient was quite well.

Quite lately, I employed the acrid principle in powder, in the dose of fifteen centigrammes (two grains and seven-tenths,) taken in a prune; it was to stop a uterine hæmorrhage, which had suddenly come on during the night; the discharge ceased the same day. But as this case stands alone, additional facts are necessary to prove the power of the acrid principle under such circumstances. In every case, monesia acts in a remarkable manner upon the uterus, when it is not in its natural state. This new medicine may be used in different ways, and it acts on different organs, particularly when they require to be strengthened without too much excitement.

This is confirmed by the following passage from M. Buchez:—

"I have tried the extract of monesia," says this skilful practitioner, "in different affections of the mouth, particularly in inflammation of the gums, and uniformly with advantage. Its application produced a good effect, by almost instantaneously soothing the pain, which often accompanies inflammation. This mode of treatment I have found very successful in the scorbutic swelling of diseased gums, and it has removed affections which had previously resisted other remedies. When caries of the teeth is attended with pain, the application of monesia is sure to remove it in a few moments."

When all the ascertained facts are compared together, one is struck by the very peculiar tonic action of monesia on every organ. As its powers have been tried in more than four hundred cases, we may be allowed to consider monesia as a very useful remedy, under several circumstances, particularly scrofulous affections and uterine hæmorrhage. Hence to the art of healing it is a real acquisition; nor is it to be imagined that this tonic has any analogy with those already known,* quite lately a tannin ointment, and monesia ointment were tried and compared with each other, and the advantage was on the side of the latter. Moreover, it is clear that every medicine acts in its own way, and that there cannot be two whose special effects are the same. Well informed practitioners know that one purgative cannot be indifferently substituted for another; that every narcotic has not, in the same degree, the power of soothing and producing sleep; that the action of the various tonics is also very different; and that the general effects of medicines are like the difference of faces; many resemble each other at the first glance, but none can sustain an exact comparison.—*London, from Paris Medical Gazette.*

* There is some mistake in the original here, "que l'on ne croie pas que ce tonique ait quelque analogie avec ceux déjà connus;" for, granting that its effects are not identical with those of any other tonic, there is a well marked analogy.—*Translator.*

Secondary Fistulæ of the Pleura in cases of Empyema and Pneumothorax.—Dr. Stokes exhibited a drawing illustrative of this pathological condition, which had, he believed, been first described by Dr. Houghton in his article on Pneumothorax, in the *Cyclopædia of Practical Medicine*. In the case then under consideration, the pleura presented the following appearances. The original fistula from within outwards, communicating with the cavity in the lung, was evident. But in addition to this opening, were several others, which had formed from without inwards; these presented oval patches, showing perforation of the serous membrane and subjacent structures, at the base of which were several circular openings, communicating with minute bronchial tubes, but not without any distinct tuberculous abscess. This condition seemed to require a very considerable duration of disease for its production; and Dr. Stokes was of opinion that these secondary fistulæ would account for some of the peculiarities in the physical signs of chronic empyema and pneumothorax.—*London Med. Gaz.*

Ulceration of the Throat, extending to the lingual artery; death by hæmorrhage.—Dr. Duncan presented the recent parts in this case. The patient, a young man, had been under treatment at the Adelaide Hospital, for ulcerated sore throat for some time, when he was suddenly attacked with hæmorrhage from the throat, which returned twice in the course of a fortnight. He had left the hospital, but was readmitted, and on the following day the bleeding returned with greater violence, and he was much exhausted. The ulceration was found to have attacked the right lingual artery, which presented a perforation capable of admitting a large sized probe. Dr. Duncan alluded to cases of the same kind which occurred under the care of the late Dr. M'Dowell, in one of which the external carotid had been tied with perfect success.—*Dublin Journal of Med. Science.*

Softening of the Anterior Column of the Spinal Cord in its cervical portion.—Dr. Power begged to draw the attention of the Society to a well marked and recent specimen of acute softening of the anterior column of the spinal cord. The patient, a woman, aged 50, was suddenly attacked with paralysis of motion in the upper and lower extremities. The bladder and rectum were unaffected; a slight power of motion remained in the limbs. There was no loss of sensation; no fever, headach, or disturbance of intellect. Sensation in the paralysed portions was perfect. Soon afterwards she was attacked with dyspnœa, and her breathing became diaphragmatic: ultimately the diaphragm became paralysed, and death took place with great dyspnœa. The spinal column was opened on the following day, and the cervical portion of the medulla spinalis was found softened to a great degree.—*Ibid.*